		10	OTP (CG A	UNITT Patter Address	ED STATES I nt and Traden ss: COMMISSIONE Washington, I	TIMENT OF C Office THOSE PATERITS AN D.C. 20231	D TRADEMARKS	
6		APPLICATION NUM			FIRST NAMED	APPLICANT	ATTORNEY DOCKE	T NO./TITLE	
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	·		N VA 22201		the file	DATE MAILEI		06/05/98	
			NOTICE 1	O FILE MISS	ING PARTS OF	APPLICATION		(0,00,00	
سنبوصد	e 1 - 151 m	normagen i destribit des la des la gegregament la la des			Date Granted			A company of the second se	نب
	is give aband 1.136(entity to avo	n TWO MONTHS F onment. Extensions a). If any of items 1 in compliance with iid abandonment.	d Filing Date have been ROM THE DATE OF sof time may be obtain or 3 through 5 are inc. 37 CFR 1.27, or Section 1.27.	THIS NOTICE vined by filing a pdicated as miss \$130.00 for a no	vithin which to file a petition accompanie ing, the SURCHAR on-small entity, mu	all required items and by the extension GE set forth in 37 art also be timely	and pay fees requirente en fee under the provoce of CFR 1.16(e) of ☐ \$ r submitted in repl	ed below to avoid visions of 37 CFR 65.00 for a small by to this NOTICE	
	If all r □ sm:	equirea items on i all entity (statemei	this form are filed w nt filed) 🔀 non-sma	vitnin the perio nii entity is \$	4 set above, the t	otai amount ow •	ed by applicant a	S A	,
	Z 1.	The statutory basic missing.	c filing fee is:			i v		· · · · · · · · · · · · · · · · · · ·	ì
	٠. ا	insufficient.	mit \$ 790.0	27)	·	,			Į
1		Applicant must sub such status (37 CF	FR 1.27). 44.00	to con	The same of the sa	·	a small entity state	ment claiming	•
: ••	X 2.	Additional claim fe	es of \$ 44.00		ling any multiple de	ependent claim fe	es, are required.		
	e gradini K	\$	for ${\cal Q}$	•	nt claims over 3.				
		\$ 44.00.		- '	claims over 20.)	·		
٠	_	Applicant must ei	for multiple depend ther submit the addit	ional claim surch	narge. F <i>or cancel addition</i>	al claims for whic	ch fees are due.	•	
:	∕ ∆ 3.	The oath or declar	ration:		MAN A	_	•		
	•	is missing or use does not cover	the newly submitted	l items.					
	·»,		fy the application to the first the city and state (sidence		- 4)	
··· ·		An oath or declara	tion in compliance w	ith 37 CFR 1. 6	3, including resider	nce information a	nd identifying the a	application by	
	☐ 4 .	• •	<i>llon Number_tand Filir</i> o the oath or declarat	•		nventor or persor	n qualified under 3	7 CFR 1.42,	
		A properly signed of Application Number	oath or declaration in er and Filing Date, is	required.			ication by the abov	10	
	□ 5 .	The signature of the	e following joint inver	ntor(s) is missing	g from the oath or	declaration: مرحمه على المنطقة المراجعة المنطقة المنط			
`	· ·	An oath or declara inventor(s), identify	tion in compliance wi	ith 37 CFR 1.63 by the above Ap	listing the names	of all inventors a	nd signed by the o	mitted	
•		A \$50.00 processing	g fee is required sind	e your check w	as returned withou	t payment (37 Cf	•		
06/	/. /17/1998	The application doe	as mailed in error be s not comply with the \$1930665 ply with Sec	ecause your che e Sequence Ru	eck was returned w les.	itnout payment.			
01	FG:104	other:	•	quence Rules 3	/ CFR 1.821-1.825). [~]		•,	
			uestions about this r	notice to "Attenti	ion: Box Missin	arts."		- No. 10 10 10 10 10 10 10 10 10 10 10 10 10	
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		mer Service Center	Division (703) 308-1	1000	1)				
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PART 2 COPY TO BE RETURNED WITH RESPONSE

FORM **PTO-1533** (REV.9-97)